Scituate Community Preservation Committee Funding Request Form

APPLICANT INFORMATION

PROJECT INFORMATION

DATE and YEAR of Application: September 25, 2017 Project Sponsor or Organization: Scituate Historical Society Contact Name & Address: David Ball, President - 43 Cudworth Road Scitaute MA 02066 Telephone Number: 781-545-1083 Email: jballdball@yahoo.com CPA CATEGORY (check all that apply):

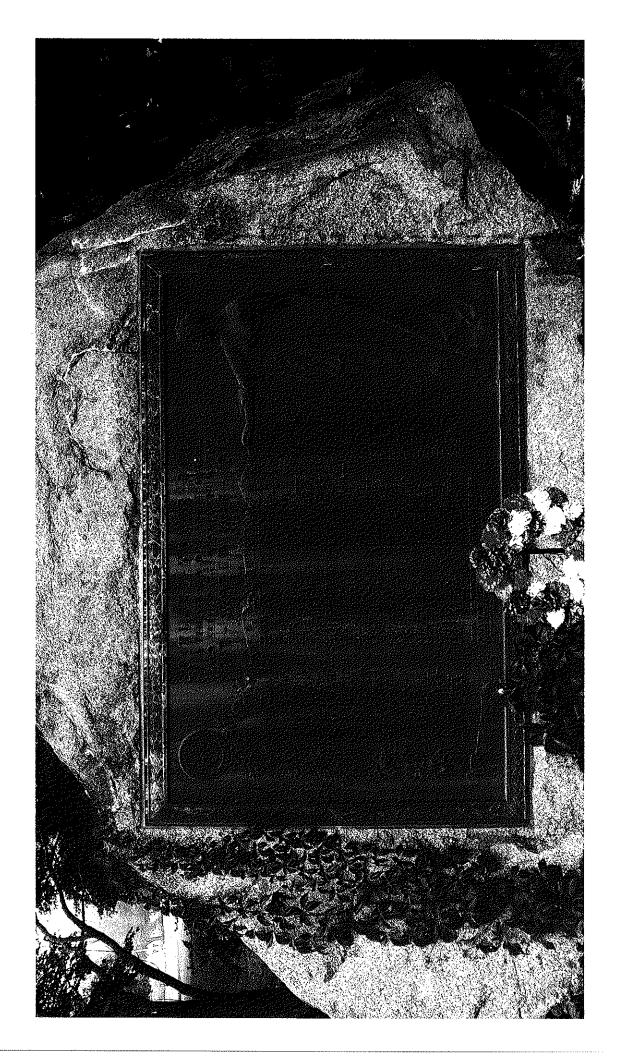
☐ OPEN SPACE	RECREATION		
✓ HISTORIC PRESERVATION	☐ COMMUNITY HOUSING		
NAME OF PROJECT: World War One Memorial Plaque Project			
BRIEF DESCRIPTION OF PROJECT: To restore two pl	laques placed in memory of World War One		
servicemen. Both are found on the Lawson Commo			
from view better integrated into the memorial. Adju	stments to landscaping may be needed.		
Attach additional pages including summ	nary, budget, estimated timeline and justification of need.		
Project Location or Address: Lawson Common, Firs	t Parish Road side		
•	map, photo and other imagery for ALL category projects.		
If Open Space or Community Housing:			
Assessor's Map Page, Block & Lot Number:			
Number of acres in parcel:	100000		
Current Zoning Classification:			
Assessed Value:			
Title in name of:	Title Abstract Date:		
Number of housing units proposed:			
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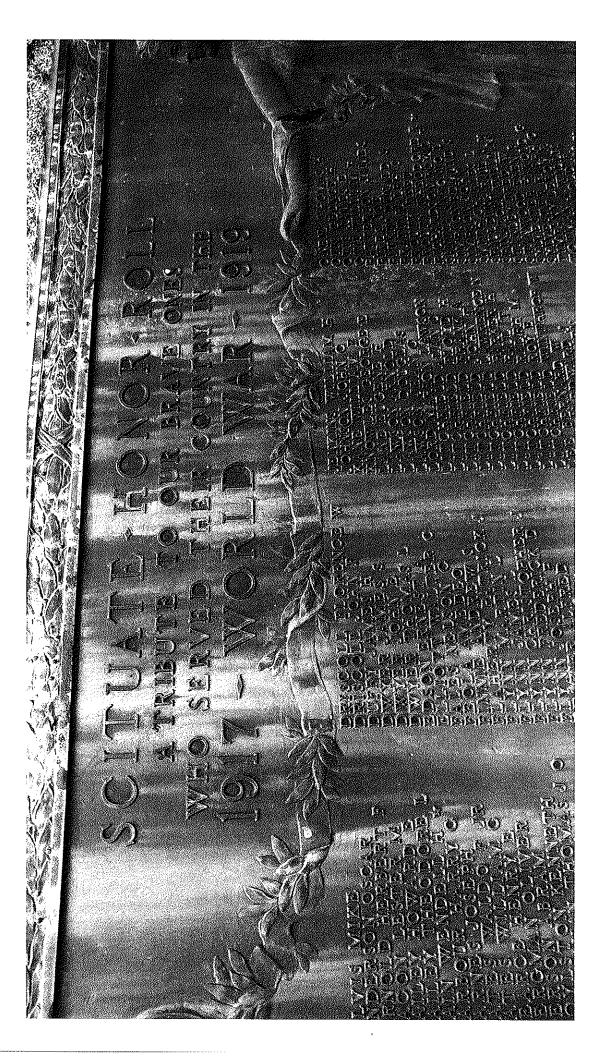
Summarize how this request Preservation Act.	benefits the Town o	of Scituate and mee	ts the goals of the Community
	cted part of Scituate	e History. With the	centennial of the First World
War's end next November	the Scituate Historic	cal Society thinks i	t appropriate to bring these
memorials back to their bes	st possible condition	n. This project is a	teachable moment for many.
PERMITS AND APPROVALS			
What permits and approvals	are required? Have	they been obtained	or have you filed for them?
Name of Permit	Filed? (Y/N)	Filed (Date)	Obtained (Date)
Have you met with any other those meetings? (Letters of sup supplied at a later date.)			
Notes:			
What non-financial support	and services are nec	essary, and how wi	ll these be provided?
FUNDING			
Describe the proposed fundi from, and whether those fun willing to provide. Community Preservation fu	ds are secured. Ide	ntify any funds you	or your organizations are
			44-24-34-34
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Proposed Funding

Total Project Cost	CPC Funds Requested	Sources of Funds other than CPA	Amount	Funding Secured? (Y/N)*
\$ 5000.00	\$ 5000.00		\$	
			\$	
			\$	
			\$	
		\$		

	<u></u>	* If the request is still outstand	ing, when do you expect to hear a decision?
OTHER COMMENTS			
Provide any other i for funding.	nformation you th	nk the CPC should be awa	re of in evaluating your request
			mpanion to the Cushing plaque
and other memoria	al restoration proje	ects completed successfu	lly in the last few years.
	d all other requir	ements of this Applicatio	uthorized, agrees to the terms on and agrees to be bound
Date:	Signature:		
This form must be a your application.	ccompanied by the	'Project Information Form	with attachments to complete
FOR COMMUNITY PRESER	VATION COMMITTEE USE		
This request receiv	ed by Scituate CPC	on	
Copies provided to	CPC Members on _		
CPC Contact:		Telephone	Number:
			t, sponsor informed on
			•
Committee Vote Votes:	Yes / No	Votes:	Date
V 0 CC3:	Tes / No	Y/N/Abstain	Date
Recommend to			
Town Meeting			
Other:			
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